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ABSTRACT

The study of regional action in nursing education in the South covers three crucial years in the history of the field, during the establishment of the Southern Regional Education Board's Council on Collegiate Education for Nursing. After an introduction to the council the report describes the arrangements made and developed for its program and related activities of the council during this period, emphasizing work in encouraging nursing research, continuing education, and expanded roles for nursing. Appended are lists of the council's participating schools and committees. (HSE)

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# Regional Planning for Nursing Education in the South, 1972-1975: A Study in Transition

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SOUTHERN REGIONAL EDUCATION BOARD
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HE009568

# Regional Planning for Nursing Education in the South, 1972-1975: A Study in Transition

Audrey F. Spector

SOUTHERN REGIONAL EDUCATION BOARD
130 Sixth Street, N.W.
Atlanta, Georgia 30313
July 1975

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# Southern Regional Education Board

The Southern Regional Education Board, formed in 1948 at the direction of the Southern Governors' Conference, was the first interstate compact for higher education in the United States. The Board directs regional planning and action in higher education; its central concern is the optimum use of higher education resources of the Southern region.

SREB staff members work with state government officials and representatives of academic institutions and other agencies to: research and report the needs, issues, and developments in higher education; conduct cooperative and interinstitutional programs to improve all levels and types of programs in higher education; provide consulting services to the region; and serve as fiscal and administrative agent in interstate arrangements for regional educational services and institutions.

The Board, which has no power of enforcement, depends entirely on the interest and commitment of cooperating states and institutions. Its basic operating costs are provided by member states, while program activity is financed for the most part by foundations and federal agencies. Member states are Alabama, Arkansas, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, South Carolina, Tennessee, Texas, Virginia, and West Virginia.

# SREB Council on Collegiate Education for Nursing

Since its inception in 1948, SREB has been involved in regional planning for nursing education. In 1962, SREB instituted a five-year project in nursing education with a grant from the W. K. Kellogg Foundation. The project was extended for an additional five years, at the end of which the current three-year project, which has been funded by the Division of Nursing of the Department of Health, Education, and Welfare, was begun. This report, then, is based on the accumulative experience of more then 25 years of regional planning and action in nursing education.

In 1962 the Council on Collegiate Education for Nursing was formed, with 63 colleges and universities participating. Its purpose was to provide the means for cooperation among participating schools of nursing and SREB. It was quickly recognized as being an important influence in the development of nursing education in the South. Since 1963, nearly all of the eligible schools have been participants.

The Council helps to formulate attitudes toward nursing education; it serves as a forum for discussion of the implications for nursing education of new developments in education, nursing, health services, and society; it provides a setting in which to test the climate for proposed activities; and it helps to consolidate thinking about the region's health needs in such a way as to promote the development of new activities.

One of the most important functions of the Council is that it brings together representatives from associate, baccalaureate, graduate, and continuing education programs, encouraging discussion of the problems shared by nursing educators in all these programs. Indeed, this facet of the Council's structure is probably its most distinctive feature; the opportunity it provides to nurse educators may well be the Council's most important long-range contribution to the health needs of the region.

In this report of the past three years of Council activity are detailed the problems and the solutions that were found to many of those problems as the Council entered its maturity as a permanent structure for regional planning for nursing education in the South.

Audrey F. Spector, Regional Planning for Nursing Project Director, has been chosen by the SREB Council on Collegiate Education for Nursing as its first Executive Director. In addition, Ms. Spector will coordinate all nursing projects funded through the Board under her appointment as the first SREB Nursing Programs Director.

# Foreword

The Council on Collegiate Education for Nursing is now concluding one era of service and is embarking upon a new course to strengthen nursing and nursing education in the South. When the Council convenes again in the Fall of 1975, although many of the faces will be the same, it will be a new organization with a new relationship to SREB. In recognizing this new affiliation, it is appropriate to recall the cooperative efforts made by many to advance nursing education in the region.

As America's first interstate compact for higher education, SREB has been able to serve both as a forum and a mechanism through which nearly one-third of the United States can work together to advance higher education. In addition to our concern for the shaping of public policies for higher educational opportunity, finance, and governance, we have focused on the orderly development and effective use of graduate and professional education in the region.

From its inception in 1948, SREB has been concerned with nursing. In that year, a Board commission on education in the health professions was organized; a key subcommittee on nursing made recommendations for regional planning in nursing education. This subcommittee was followed in 1951 by the Committee on Nursing Education, which identified the need for "adequately trained instructors, supervisors, and administrators" as the South's most significant priority in nursing. The Committee stipulated that the master's degree, "based on sound basic nursing training," was essential to effective functioning in such positions. At that time there were no graduate programs in nursing in the region, and only a fraction of the baccalaureate programs we now have. First attention, then, was to the development of master's programs, with six established by the mid-fifties.

The interesting and significant thing is that these six programs were developed through the cooperative study, planning, and action of SREB and the existing baccalaureate programs. Criteria for establishing master's degrees were jointly agreed upon by all institutions, as was the allocation of specializations among the six original programs. Even funding was a cooperative venture among three foundations—the Commonwealth Fund, the W. K. Kellogg Foundation, and the Rockefeller Foundation.

With the South's first graduate programs under way, and new ones being developed, regional attention was next directed toward strengthening and expanding nursing education programs at all levels. In 1962, again with the assistance of the Kellogg Foundation, SREB developed its first Regional Project in Nursing Education with the Council as the major mechanism for working toward these goals.

Our review would be incomplete without recalling some of the issues that have been examined and actions that have been taken—cooperatively and regionally—in the last 13 years: statewide planning; new instructional strategies and techniques; curriculum theory and development; inservice programs for administrators and faculty. These are some, but not all, of the ways in which SREB and the members of the Council have worked together. They constitute a record of accomplishment in which all of us can take satisfaction.

But neither SREB nor the Council is willing to rest on that record. Our combined efforts can continue to generate regional programs that will assist individual schools in preparing nurses to meet present and future needs of health care delivery.

I welcome this new affiliation between SREB and the Council, in the belief that it provides a continuing way to strengthen programs in nursing to meet the health care needs of our region. The Council and SREB have entered into an association that is sufficiently flexible to meet the rapidly changing needs in nursing education and health care delivery. We will all need to remain alert to changes in higher education, in health needs, and in nursing education and practice. Together, the Council and SREB should be able to accomplish more in nursing than either could do alone.

I take this opportunity to congratulate Audrey Spector for the fine work she has done as director of the current project. I want also to express SREB's great appreciation for the generous support from both private and public sources, especially the W. K. Kellogg Foundation and the Department of Health, Education, and Welfare—for regional development of nursing education. That support has enabled us to advance to this point.

Finally, it is only fitting to acknowledge that the chief reason for the success attained to date has been the determination of nurse educators in the region to improve their profession. I am confident that the future efforts of the Council will enhance nursing in this region and that those efforts will continue to have the support of SREB.

Winfred L. Godwin
President

# Preface

This report on regional action in nursing education in the South covers the three years 1972-1975, which, as it turns out, were crucial in the history of regional planning in the field of nursing. This was the transitional period during which the SREB Council on Collegiate Education for Nursing sought and found the means for establishing itself as a permanent structure. Cooperative action among collegiate nursing programs in the 14 Southern states can now be planned in the secure knowledge that funds from outside sources to support the planning body need not be sought over and over again, at all-too-frequent intervals.

Although this report is intended primarily for the use of persons in the Southern region, it has been written with others in mind as well. Those of us who are working in regional planning have seen a great increase in concern for regional and interstate approaches to cooperative action among nursing education programs; our experience in the South will, we hope, prove to be helpful to others as they seek models for their own regional planning organizations. For the South, the report provides a reference for nurse educators who will plan future regional activities in the light of the Council's past. It is also intended for persons whose work is closely related to the work of the Council and SREB, such as state commissions on higher education, and others responsible for nursing education.

Besides the introductory section and the evaluation and summary at the end, the report is divided into two main sections. The first, regional planning, describes the arrangements that were made and how they were developed as Council members and project staff sought the means for securing the future of the Council. The second section describes other related activities conducted by the project during the three years of its existence, emphasizing particularly the Council's work in encouraging nursing research, continuing education, and expanded roles for nursing.

Finally, some words of acknowledgment are in order: as is often true with reports of this nature, our debts are many. Only a few individuals are listed in this summary report, but the thoughtful action and sustained efforts of over 300 deans and directors of nursing programs in the 14 Southern states made the activities described here possible. I am grateful to them; to Barbara Newton, project assistant; and to Barbara Reitt, for editorial assistance with this report.

Audrey F. Spector
Project Director

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# Introduction
# The Establishment of the Project

As the SREB Council on Collegiate Education for Nursing neared the end of its first 10 years, it confronted the problem of its own future. All concerned agreed that regional planning for nursing education is essential to the well-being of the nursing profession and of the population it serves in the South. Therefore, Council members were determined that a permanent arrangement to continue the Council should be found. That was the mandate handed to the new project as it began its work in 1972, and that is, in fact, the job it had completed by 1975.

The "new" Council on Collegiate Education for Nursing will provide the region's nursing schools and health care system with the benefit not only of its ability to formulate concepts, pinpoint issues, and galvanize opinion, but also its unique capacity to institute and implement cooperative action among the region's nurse educators. The fact that these services are now to be available indefinitely is a development of inestimable value to the region.

The Council members and the project staff, with the assistance of professionals from the SREB staff and outside consultants, devoted a major portion of their time and energy to this most important task. Details about this effort are recounted in the section below entitled "Forming a Permanent Structure for Regional Planning in Nursing."

As Dr. William O'Connell pointed out in his opening address to the Council at its 18th meeting in 1972, regional cooperation is "a means for providing a continuing, balanced system of education" that "does not conflict with the prerogatives of institutional autonomy; rather, it seeks to establish the most favorable environment within which each institution can pursue its own destiny."* The emphasis, then, is on the process of helping individuals, institutions, and state agencies to determine what needs to be done and encouraging them to do something about it. Two of the most important mechanisms for regional planning seen in this light are: 1) providing information of many types and 2) bringing people together to discuss and explore significant problems. Both of these can be expected to enhance the quality of planning and decision-making as well as to influence the direction or the speed of action taken.

The 1972-1975 project, then, was designed to carry forward with the Council on Collegiate Education for Nursing in a form that was to remain, at least for the duration of the project, essentially unchanged. Experience had shown that the Council, in its meetings, publications, and other activities, had provided nurse educators in the region with the information and the opportunity for the exchange of ideas that is central to effective regional planning. The Council is made up of representatives of over 200 colleges and universities in SREB states which offer associate, baccalaureate, and graduate degree

*William R. O'Connell, Jr., "New Developments in Regional Cooperation," *SREB Council on Collegiate Education for Nursing: Report of the 18th Meeting* (Atlanta: SREB, 1973), p. 7.

programs in nursing. These people, meeting twice a year with the heads of other college-sponsored nursing programs and with such guests, for example, as representatives of nursing organizations and nursing publications, have created a climate of group support and cohesiveness that is conducive to genuine action and progress. These benefits that accrue to the region from the Council's work were among the purposes that the project was expected to pursue during the years 1972-1975.

The project proposal singled out several specific areas of concern that were to receive special attention during this three-year period. Subsumed under the broad goal of improving and expanding nursing education in the South, these included improving and expanding graduate education in nursing by means of encouraging nursing research; encouraging the development of improved and expanded continuing education programs for nurses within colleges and universities; improving faculty competence through workshops, seminars, and other projects; assisting and encouraging statewide planning in nursing education; and assisting in the implementation in the South of appropriate recommendations of the National Commission for the Study of Nursing and Nursing Education. The details concerning the project's efforts in these areas are provided in the section of the report below entitled "The Work of the Project 1972-1975."

# Part I
# Forming a Permanent Structure for Regional Planning for Nursing

## Theoretical Discussion of Regional Planning

There is only one reason for regional planning in nursing education: to achieve that which cannot be done by individual schools acting in isolation or through other existing mechanisms. Regional planning, like local, state, and national planning, requires time, energy, and money, and is justified only to the extent that benefits outweigh the costs. Benefits to the region as a whole are not sufficient justification for individual schools to participate in a regional body; each school must be able to see a direct benefit from the human and financial investment it makes in the regional effort.

To participate in regional planning, individuals and the schools they represent have to feel a strong need to accomplish something that is important to them. Regional planning may address a specific task, such as to develop graduate programs, or it can have a broader purpose and address more than one need. Once a regional group determines its task and identifies those who are interested in working together toward a common goal, it can then tackle the "how to do it" part, which includes: (1) finding a way to finance regional activities, (2) deciding who needs to participate in the group so the task can be accomplished, (3) deciding who will do the work, and (4) developing an organizational structure.

Financing regional planning groups is a challenge but it need not be an insurmountable obstacle. Participants who believe the goals are worthwhile will find a way to at least pay the cost of attending meetings. If goals are clearly defined and meet a well-documented need, funding can often be obtained from local, regional, federal, or philanthropic sources. Brainstorming sessions to identify potential funding sources can bring to light groups who are interested in supporting the type of activity the regional group expects to engage in. Funding that is secured is best regarded as seed money to get the regional group organized and to support its basic activities while it seeks a more permanent financial base. If, after an initial period with support from outside sources, the regional group is unable to support its own operation, it may be that the original task of the group has been accomplished and the participants no longer feel the need for regional action. Or it may be that what was originally thought to be a reasonably homogeneous body with common concerns finds through experience that it does not have enough in common to develop into a cohesive group with a strong drive to continue.

The decision about who needs to be included in membership of a regional planning for nursing group is influenced by a number of considerations, including: the purpose of the group; the number of states whose location in relation to each other makes it convenient to get together; the need to main-

tain a group which is not so large as to be unwieldy, but is sufficiently representative of the region; and the presence or absence of a possible parent organization for the regional nursing group.

If the regional group is to accomplish anything, all its members must actively participate in setting the goals and establishing priorities. This can be accomplished through discussions at regional meetings, but written reports about anticipated activities and progress toward achieving specific goals are also needed. Some means of reaching consensus is necessary in order for the goals and priorities to be clear-cut and understood by all participants. A common practice is to explore a problem in a general meeting of all participants, with smaller special interest groups then examining the topic in greater detail and with a different perspective. At a final gathering of the total group, the views and recommendations of the discussion groups are presented. This method promotes sharing of ideas and can generate ideas for ways to approach a problem. However, it is best followed by a formal vote on any specific recommendations that emerge. Otherwise, the meeting can result in "all talk and no action," because there may be too many recommendations for the group to act upon. Voting can be done at the meeting or later by mail.

While the total membership of a regional body participates in determining the major needs and goals of the group, smaller working committees are necessary to implement the larger group's recommendations.

Staff for a regional planning group is essential because participants have limited time to spend on regional projects and at the same time carry on responsibilities at their own institutions. The number of staff needed and their qualifications depends on the nature of the regional organization and its purpose. Staff serves in two dimensions, which can be described as professional and procedural, or, as some would say, "professional and nitty-gritty." Professional activities include providing the regional group with information about nursing, higher education, and the health field; suggesting activities; implementing the group's recommendations; interpreting the group's concerns and actions to appropriate groups; and other activities to strengthen the professional goals of the regional nurse group. The procedural aspect includes arranging for meetings, for publication of reports, and the like. To conduct the professional part of the work, it helps if the key staff person is a nurse; to assist with other work, additional supporting staff members may possess a wide range of education and experience outside nursing.

The organizational structure of regional planning groups for nursing education is effected by the presence or absence of a parent body such as the interstate compacts for higher education which exist in the South, Northeast, and the West. Nursing activities conducted under the umbrella of these or any other organization necessarily operate under the general policies and in accordance with the goals of the parent organization. Even in these three regions, however, nursing activities are organized differently—priorities, membership in the nursing body, and methods of financing differ considerably—because each region develops according to its unique social, political, and economic climate.

## How the Council Was Re-structured 1972-1975

The three year project accomplished its purpose: arrangements were made whereby regional planning for nursing education would be continued indefinitely, and a broad program of regional activities related to improvement and expansion of nursing education in the South was conducted. This section of the report describes how prospects were explored and arrangements worked out for continuation of regional planning for nursing education in the South after the conclusion of the project which terminated on June 30, 1975.

The groundwork to achieve this aim was laid in the first year of the project. At the November 1972 meeting of the SREB Council on Collegiate Education for Nursing, the project director discussed the project's purpose and outlined a timetable to achieve it. Following that meeting, the project director and the Council's Steering Committee discussed the possibility of continuing regional planning for nursing through some arrangement with SREB or with one of the national professional associations, particularly the National League for Nursing (NLN) or the American Nurses' Association (ANA). The Council, when presented with these possibilities at its Spring 1973 meeting, voted unanimously in favor of further exploration of sponsorship through SREB.

In view of the Council's vote, project staff and the Council's Steering Committee continued discussions with SREB staff and appointed a special committee, the Long-Range Planning Committee, to assist project staff and the Steering Committee in exploring the future of the Council. At its first meeting in June, 1973, this committee agreed that regional planning for nursing was needed, and that the Council was essential for such planning.

### COUNCIL RE-CONSTRUCTION

SREB confirmed its desire to continue working with the Council as long as outside funding was available to support the Council's activities. The committee then discussed the possibility of Council members contributing funds to support the Council, as well as possible affiliation with professional organizations such as NLN and ANA. In August 1973, project staff and representatives of the Steering Committee met with NLN and ANA representatives and discussed possible arrangements for regional meetings of nursing educators in the South under their auspices. In these preliminary discussions, the representatives of NLN and ANA each expressed interest and agreed to further discussion if the Council so desired.

Because of the Council's consistent wish to continue under the auspices of SREB and because financing was the main obstacle, the decision was made to get an initial reading about the Council's ability to finance itself. A postcard questionnaire, mailed to 286 individual members of the Council on October 1973, asked about the institution's potential to contribute annual dues. Replies indicated that the members of the Council were less than enthusiastic to this first inquiry about contributing money to support the Council. Slightly over half of those responding indicated their institutions would not be able to contribute annual dues to support the Council.

At its fall 1973 meeting, the Council discussed the results of the survey and again considered the feasibility of further exploration with NLN, ANA, and

SREB. The 219 persons at the meeting met as state groups and the 14 state groups made some basic decisions:

(a) Thirteen states voted "Yes" in answer to the question "Is there a need for a regional body in nursing?" while only one state voted "No."

(b) The focus and activities of such a body given highest priority were: be an action body—make recommendations and position statements; stimulate research and demonstration projects on new or different nursing practice, and explore the impact of practitioners in health services; compile data; and demonstrate the effects of education and practice.

(c) To finance the Council, the most predominate view was that the nursing schools should seek funds from their respective states.

In a general session that followed the state group meetings, further discussion about financing for the Council ended with the Council's recommending that SREB request an increased contribution from the fourteen states to support nursing under the auspices of SREB.

In the following months, the Council's request about additional financing from the states was discussed at length by the project director and other staff members at SREB. SREB's position, after careful consideration and soundings of the Board, was that SREB would like to continue some involvement with the regional nursing program if at all possible; however, it did not seem likely or reasonable that states would provide special funds for development in a single discipline.

In view of SREB's position, it was again necessary for the Council's committees to consider other alternatives. It was evident that if the Council was to continue, it either had to do so in association with another organization, or find a way to be self-supporting and continue in association with SREB. At a joint meeting of the Steering Committee and the Long Range Planning Committee, it was decided that two options should be presented to the Council: 1) that deans and directors of nursing education programs in the South should meet after 1975 under the auspices of NLN; 2) that each school should pay $100 per year in order for the Council to continue in association with SREB.

In preparation for the next Council meeting, details concerning these two options were explored. On March 15, 1974, a conference call with NLN and SREB representatives was held to discuss in more detail how arrangements could be worked out in the event the Council should decide to seek affiliation with NLN. A letter from the executive director of NLN confirmed the arrangements which were developed in the phone conference. Discussion of the second option resulted in the conclusion that if the Council wished to continue in association with SREB and each school contributed $100 per year, the money would probably pay for one staff person and one secretary to be housed at SREB. This arrangement with minimal staff would maintain the Council's association with SREB.

Meetings of the Council could be hosted by various colleges and universities in the region. A registration fee could be charged for attending Council meetings. Perhaps one meeting per year would be for faculty and one for deans and directors. Any special projects in nursing developed at SREB would involve the Council as part of the project.

On March 20, 1974, the project director sent a copy of the letter from the NLN executive director and a memorandum to Council members describing the developments and asking the Council to vote at the April Council meeting on the two options. Persons who would not attend the April meeting were encouraged to vote by mail.

In a two hour discussion at the opening session of the April 3-5, 1974 Council meeting, NLN and SREB representatives provided additional information and answered questions from Council members about the two options. It was noted that only two more Council meetings remained in the project: Fall, 1974, and Spring, 1975. Whatever direction the Council chose, the next year and those two meetings were needed to finalize arrangements.

The membership was asked to vote on these two options by secret ballot before noon, Thursday, April 4. The membership voted in favor of continuing its activities in association with SREB. Results of the vote were reported in a general session on the afternoon of April 4. Council members offered many suggestions for various ways to assess the schools. Some of these were: a flat $100 annual fee for each institution wishing to join the Council; a sliding scale based on the number of students enrolled in the school or based on the school's budget; higher fees for schools which have more than one type program—that is, a school with an associate degree, baccalaureate, master's, doctoral and continuing education program would pay more than a school with only one type program.

The session closed with the understanding that project staff with the Council's Steering and Long-Range Planning Committees would explore the suggestions and present a plan to the Council for further refinement.

Following the Council's vote to continue in association with SREB and to support itself through membership fees, the staff along with the Council's Steering and Long-Range Planning Committees developed draft documents describing the organizational arrangements: "A Memorandum of Agreement Between the Council on Collegiate Education for Nursing and the Southern Regional Education Board," and "A Statement of Institutional Participation."

In July 1974, these draft documents were mailed to the Council with a request for suggestions or comments. Of the 331 individuals to whom the drafts were sent, 171 responded. The majority said both documents were acceptable as written; a few persons suggested changes or asked for clarification, mainly about criteria for membership, fees, and how the executive committee would be selected.

At its October 30-November 1, 1974 meeting, the Council discussed the draft documents, made revisions, and adopted the versions shown on the following pages.

Throughout the long and difficult process of devising a new structure for the Council, it was clear that Council members believed strongly in the value of regional planning in nursing education for the South and in the viability of some such organization to carry out this planning. Members' unflagging zeal in the pursuit of solutions to perplexing practical dilemmas gave strong evidence that regional planning had made its mark and had earned the support of the region's nursing leaders.

## A Statement of Institutional Participation
## SREB Council on Collegiate Education for Nursing

### INTRODUCTION

Since it was formed in 1962, the SREB Council on Collegiate Education for Nursing has been the major planning body for regional nursing activities in the South. The Council has benefited individual schools and the region as a whole. Through conferences and other educational programs for faculty and directors of nursing education programs, regional studies and publications, nursing leaders in the South have studied problems, trends, and resources in the region and engaged in cooperative action to meet the nursing needs of the South.

Throughout the years, the Council has been supported by foundations and federal grants. In 1975 the Council and the Southern Regional Education Board will enter a new phase. the Council will continue in association with SREB, but funding for the Council will be provided by institutions whose representatives are members of the Council.

In the new arrangement, the Council's activities to strengthen nursing education in colleges and universities in the South will continue. The Council will relate nursing education to the practice of nursing, to research in nursing, and to the education and practice of other health disciplines. The ultimate goal of the Council is to improve health care services in the South.

### OBJECTIVES

The objectives of this Council are to

- identify problems, needs, and resources for nursing and nursing education in the South;
- plan and conduct appropriate regional activities to strengthen nursing and nursing education in the South;
- provide a forum for sharing information and promoting communication among all types of collegiate nursing education programs;
- stimulate research in nursing within colleges and universities in the region.

To achieve these objectives, the Council will engage in a variety of activities including conducting studies and publishing reports; making recommendations, adopting resolutions or position statements as a basis for planning and action; conducting meetings of the Council at least once per year, and conducting other meetings as appropriate to achieve specific goals.

### INSTITUTIONAL PARTICIPATION

Regionally accredited colleges and universities which offer programs in nursing and which are located in any of the fourteen states that compose the Southern Regional Board compact are eligible for membership in the Council. Participation in the Council is for such time as the cooperating institutions and SREB desire, and as long as the participating institution pays the current membership fee.

#### Membership

Each participating institution will be represented on the Council by the nurse educator, the administrative head of the institution's nursing program, who will be appointed by the president or administrative officer of the respective institution. Institutions with nursing programs administered separately by a school of nursing and a school of public health may have two representatives, one from each school, if desired.

Individual institutions offering more than one type program (for example, associate degree, baccalaureate, master's, continuing education) are eligible to appoint the nurse director of each of these programs to the Council. Appointment of each of these persons shall be by the nurse educator who is administrative head of the institution's nursing

program. In the example given, the institution is eligible to have five persons on the Council: the administrative head of the nursing program and the four directors.

In those states which have a statewide system for nursing education, or colleges or universities with entirely separate schools, each component school will be eligible to participate in the Council as an individual institution. In addition, administrative heads or coordinators of statewide systems are eligible for full membership in the Council.

New schools in institutions which are regionally accredited will be eligible for immediate Council membership. If the institution is not regionally accredited, the nurse representative may attend as a guest by paying a registration fee.

Council membership is non-transferable and includes only those persons designated as members. However, the designated individual may, if unable to attend a Council meeting, appoint an alternate who may participate and vote at the Council meeting.

Requests for membership will be reviewed by the Council's Executive Committee until such time as a special committee on membership is established. Requests for membership will be approved or disapproved according to criteria established by the Council. The criteria are included under *Membership* in this Statement of Institutional Participation.

### Responsibilities of Council Members

The responsibilities of Council members are: attending periodic meetings of the Council, assisting in various regional nursing activities, keeping personally informed about regional needs and activities relating to nursing education and research, and as appropriate, keeping other members of the nursing faculty and college or university administration informed.

## ORGANIZATIONAL STRUCTURE

### Committees

An Executive Committee will coordinate the Council's business and work as appropriate with Council staff. The committee will be comprised of seven members, five elected by the Council and two appointed by SREB. The Council's executive director will be an ex-officio, non-voting member of the Executive Committee.

The Executive Committee shall elect its chairman and any other officers it deems necessary within the Executive Committee, such as Vice-Chairman and Secretary.

The Executive Committee shall be comprised of Council members whose dues are paid and who are eligible for one full vote. Committee members will serve two full years, with one additional term possible, i.e., two successive terms. "Staggered" terms will be established to provide continuity in the committee.

In order to assure representation of various types of education programs and geographic areas, election of Executive Committee members will be as follows:

Council members will be mailed a list of individuals who have been designated as members and whose dues are paid. From this list, each member will be requested to submit three names and biographical sketches of persons to be considered by the present Steering Committee of the Council. The Steering Committee will structure a ballot which will be mailed to each member of the Council.

Other committees will be formed as needed. Such committees, to be appointed by the Executive Committee, will make recommendations to the Executive Committee. Examples of such committees are: membership committee and ad hoc committees for special projects.

### Meetings

Meetings of the Council will be held once or twice annually upon recommendation of the Executive Committee of the Council. Attendance at Council meetings is at institutional expense. At these meetings each representative of a participating institution present is entitled to vote.

### Fees

Each institution participating in the Council shall pay a minimum of $150 per year to

cover membership fee for the administrative head of the institution's nursing education program. In those states which have a statewide system for nursing education, each component school represented on the Council will pay a minimum of $150 per year and the individual nursing educator responsible for coordinating the statewide system will also pay $150 per year.

An institution which has more than one type of program naming as Council members directors of the institution's associate degree, baccalaureate, graduate, and continuing education programs will pay an annual fee of $75 for each of the four program directors plus $150 for the administrative head.

Representatives of new schools of nursing may attend Council meetings as guests, with a limit of two Council meetings, by paying a $50 registration fee.

## Voting

All members of the Council are eligible to vote. Persons who are eligible for one full vote are: the administrative head of the participating institution's nursing education program and heads or coordinators of statewide systems of nursing education programs. Persons eligible for one-half vote are: persons appointed by the nursing educator who is administrative head of the institution's nursing education program (example: directors of associate degree, baccalaureate, graduate, and continuing education programs within the participating institution).

## A Memorandum of Agreement Between the Council on Collegiate Education for Nursing and the Southern Regional Education Board

This Memorandum of Agreement establishes procedures and conditions for regional cooperative activities in nursing in the Southern region to be pursued jointly by the Council on Collegiate Education for Nursing and the Southern Regional Education Board (SREB).

### I. Purpose

The Council, in affiliation with SREB, shall engage in cooperative regional planning and activities to strengthen nursing education in colleges and universities in the South.

### II. Agreement

A. The Council agrees:

1. to establish an Executive Committee of seven members, two of whom shall be continuing representatives of and appointed by SREB from term to term, and five of whom shall be elected by the Council;
2. to select and appoint, as well as retain or dismiss, the executive director of the Council, and to participate in the selection process of professional staff for special projects of the Council; and
3. to determine policy, program, and annual budget for the accomplishment of Council objectives.

B. SREB agrees:

1. to appoint its two representatives to the Council's Executive Committee.
2. to assume overall administrative and fiscal responsibilities for the Council subject to the policies, program objectives and annual budget determined by the Council's Executive Committee, to include:
   a. assuming custody and management of Council funds, future collecting, and disbursing of funds from various sources for the Council with appropriate monthly accounting of such activities to the Council on the condition that said funds be collected, disbursed and managed only in pursuit of specific program objectives and within the Council approved annual budget;
   b. investing Council funds within guiding principles stated by the Council with interest from such investments credited to the Council;
   c. developing in cooperation with the Council such relationships and arrangements as necessary to facilitate the Council's activities;
   d. soliciting jointly with the Council funds for effective operation of the Council's activities as determined by the Council's Executive Committee; and
   e. locating the Council staff with SREB, such staff operating under personnel and administrative policies for SREB staff and various other special projects.

### III. Duration of this Agreement

A. This Memorandum of Agreement shall become effective on June 1, 1975.

B. This Memorandum of Agreement shall be reviewed after one year to determine if changes are necessary and such changes shall be brought to the Council for approval. Thereafter, this Memorandum of Agreement shall be reviewed biennially, with automatic renewal for the same term unless notice to terminate is given.

C. Either party may withdraw from this agreement on six month's written notice to:

Chairman, Executive Committee
Council on Collegiate Education
for Nursing
Southern Regional Education Board
130 Sixth Street, N.W.
Atlanta, Georgia 30313

President
Southern Regional Education Board
130 Sixth Street, N.W.
Atlanta, Georgia 30313

Signed Marie L. O'Koren
Chairman, Executive Committee
Council on Collegiate Education
for Nursing

Signed Winfred L. Godwin
President, Southern Regional
Education Board

Date December 2, 1974

# Part II
# The Work of the Project 1972-1975

## Encouraging Nursing Research in the South

*"The purest motive for research is a deeply felt urge to relate effects to their causes."**

It has long been recognized by leaders in the nursing profession that scientific research in nursing theory and practice is essential to its advancement as an applied science. The need for regional action to encourage nursing research in the South has been a primary concern of the SREB Council on Collegiate Education for Nursing ever since the Council's first planning conference in 1962, but it was not until the current three-year project was being planned that factors combined and support jelled in such a way as to allow the cooperative efforts in research development by the Council, SREB, and other institutions to bear rich fruit.

In the years 1972-1975, the South's first regional research project, generated earlier, has been supported and new activities have been undertaken.

### THE REGION'S FIRST RESEARCH PROJECT

In the spring of 1971 an ad hoc committee of the Council pointed to the lack of nursing research as a major deterrent to quality graduate education in Southern nursing programs. At that time three university nursing programs in the South had federally supported faculty research development projects. The directors of these three development programs (Dr. Norma Grand, University of Maryland; Miss Joyce Semradek, University of North Carolina at Chapel Hill; and Dr. Phyllis Verhonick, University of Virginia) formed an ad hoc committee on research. With this committee of three serving as a nucleus, a project proposal was developed, entitled "Continuing Education in Nursing Research: A Regional Approach to Faculty Development."

The project was funded by the Division of Nursing, Department of Health, Education, and Welfare in 1974. It is administered at the University of North Carolina at Chapel Hill, with Joyce Semradek as project director. Steering Committee members are: James W. Dickoff and Patricia James of Kent State University; Mary Neal, University of Maryland; Audrey Spector, SREB; Phyllis Verhonick, University of Virginia; and Carolyn Williams, University of North Carolina at Chapel Hill.

The purpose of the project is to demonstrate and to evaluate a method of regional research training and development. More specifically, its aims are: (1) to improve the clinical research competence of faculty in schools of nurs-

*Dr. Beatrice J. Kalisch, "The Researcher's Role in Nursing," *SREB Council on Collegiate Education for Nursing: Report of the 21st Meeting* (Atlanta: SREB, 1974), p. 38.

ing with graduate programs, (2) to generate clinical research projects in settings in which graduate students are learning, (3) to help nursing faculty members design and complete research projects within the realities of their home setting, (4) to produce research that will improve patient care, and (5) to identify factors that contribute to success or lack of success in achieving the above desired outcomes.

Research with a practice emphasis is likely to require input from a number of sources. It is not individualistic and in many cases can not be identified with one researcher. Success depends on the support of the researchers' peers, subordinates, and superiors. Thus, development of a support system is essential if nursing research is to be viable. One possible way to encourage such a support system is to prepare preceptors who will facilitate the research activities of others. The committee, therefore, agreed that this project should bring together and provide guidance and support for faculty members who would serve in turn as preceptors in their home settings.

The project is being carried out in two year-long training phases, or workshops, for two groups of participants, with an initial planning and recruitment phase, a brief evaluation and planning period between workshops, and a final evaluation period. The workshop now in progress runs from January 1975 through January 1976. Twenty-one participants from 17 institutions in 13 states have developed designs for research studies which they are now conducting in their home settings. At the end of the year they will reconvene to report on the data they have collected and to present their reports, at which time they will be afforded the opportunity for criticism and the formulation of future research.

The second workshop is scheduled for the year running from September 1976 to September 1977. The steering committee of the project is considering several possible changes: (1) revising the admission criteria to include faculty members from settings other than those in which graduate students are learning, and (2) holding more than one workshop, with group sessions at other locations besides Chapel Hill.

Throughout this first regional research project, a close tie has been maintained between the project and the Council. Two progress reports on the workshop have been sent to Council members; the SREB staff member serving on the Steering Committee of the research project helps to coordinate the work of this first research project with other activities generated in the area of research.

## NEW ACTIVITY UNDERTAKEN

### The Formation and Work of the Research Committee

Clearly, support for nursing research development on a regional scale was beginning to emerge, and the time was ripe for concentrated action in this area by the SREB Council. At the spring 1973 meeting of the Council it was announced that a committee on research would be appointed. The committee would consist of six members and would advise the project staff and the members of the Council's Steering Committee on action to strengthen nursing re-

search in the South. In addition to the expertise provided by its own members, the committee would draw upon the knowledge and experience that outside consultants could offer.

Directors and deans of graduate programs in the region were asked to suggest the names of persons to serve on the committee. The members of the committee that was subsequently appointed was intended to be representative of the states in the region and of the various type of programs. Dr. Dorothy Talbot, representing the Council's Steering Committee, serves as chairman of the Research Committee. Other members are: Dr. Gloria Francis of Virginia Commonwealth University; Dr. Patty Hawken of Emory University; Joyce Semradek of the University of North Carolina at Chapel Hill; Dr. Marilyn Willman of the University of Texas; Gertrude Hodges of the Community College of Baltimore; and Dr. Phyllis Verhonick of the University of Virginia.

At its first meeting on June 30, 1973, the Research Committee agreed on the following long-range goal in regional research: to have more ongoing research in the South directed toward improving nursing practice and nursing education, with the ultimate purpose being the improvement of patient care. Short-range goals that were also discussed at this meeting included: giving high visibility to nursing research; devoting the program of the spring 1974 Council meeting to nursing research; holding a nursing research conference in the South; publishing abstracts of nursing research being conducted in the South; disseminating a roster of nursing researchers now working in the South; and distributing a regional research newsletter.

The committee focused most of its attention, however, on the possibility of developing a proposal for an SREB project to strengthen nursing research in the South. Support from nursing leaders in the region for such a project seemed substantial enough, but committee members were agreed that much background preparation would be necessary before a formal proposal could be prepared. Information about the current status of nursing research in the region would have to be determined, and the input of nursing educators, through the vehicle of a Council meeting, was thought to be important.

## The Nursing Research Survey: The First Step

Because it is well-nigh impossible to plan where you will be going without knowing where you are, the Research Committee focused its attention first on planning a survey of all research and investigative studies in nursing that were being conducted in the region. The committee was convinced that it would be essential to know not only who was studying what, but what support these studies were receiving. What are the resources for nursing research in the region? What kind of support is currently available? A survey would be the best way to unearth such valuable information.

Dr. Lucille E. Notter, co-editor of *Cardiovascular Nursing*, Director of NLN Conferences on the Open Curriculum in Nursing, and formerly the editor of *Nursing Research*, was invited to serve as consultant to the committee. She was instrumental in the design of the questionnaires that were sent to Southern education institutions as well as to federal agencies operating in the region. The questionnaire was sent out in December 1973, and by May 1974

the results were ready for publication. The SREB publication entitled *Nursing Research in the South: A Survey* by Dr. Lucille E. Notter and Audrey F. Spector presents an analysis of the replies to the questionnaires and a listing by subject headings of all the nursing studies that were reported to SREB. It was hoped that the information pulled together in this manner would provide a basis for future planning, not only by the Council and SREB but also by other institutions in the region. The book was sent not only to each person listed on the Council roster but also to state nurses' associations, state leagues for nursing, the libraries of each school of nursing in the South, and to federal agencies and selected institutions outside the South.

## The 21st Meeting of the Council: The Program on Research

Because the published report of the survey results would not be mailed to members until late summer of 1974, the survey results were made available to Council members at their spring 1974 meeting in the form of a preliminary report by Dr. Notter. The report was one of the highlights of the proceedings, which were focused on research in nursing in the South. The program explored the interrelated roles of associate degree, baccalaureate, and graduate education programs in conducting both formal and less formal investigative studies in nursing.

In her keynote address, Dr. Rozella Schlotfeldt of Case Western Reserve University argued that research is "essential not only to the survival of the nursing profession, but also, and more important, essential to the well-being of those who are served by nurses."* Her assessment of what research is, of what studies should be undertaken, of who should be conducting the studies, and of how research can be encouraged presented the meeting's participants with the heart of the matter—the substantive issues that would require careful consideration before a proposal for action in nursing research could be formulated.

Other speakers presented papers that examined research issues and problems in the various kinds of nursing education programs, from the points of view of the researcher and of the dean, as well as an overview of research activities in the Western region and in the South. Finally, Dr. Dorothy Talbot, chairman of the Research Committee, reported to the Council a summary of the nine group discussions that had been held during the course of the conference. In Dr. Talbot's report is contained the input from the region that the Research Committee was seeking as it prepared to write a final draft of the research proposal.

Dr. Talbot's analysis of the reports from the discussion groups is concise but rich in detail. She enumerated the subjects for research that seem to have captured the most frequent concern and interest—and the focus seems to have been most often on unresolved issues in nursing education—as well as the goals that emerged as being primary as Council members discussed the things they expected that improved nursing research would do for the nursing

*Rozella M. Schlotfeldt, "Cooperative Nursing Investigations: A Role for Everyone," *SREB Council on Collegiate Education for Nursing: Report of the 21st Meeting* (Atlanta: SREB, 1974), p. 1.

profession, and the obstacles and constraints that must be kept in mind as regional planning for the expansion of nursing research gets underway.

These three days in April 1974 made it clear to the Committee and to the project staff that the Council was ready to undertake a major project in the area of nursing research. The mandate was there; the Research Committee had then to begin its work to get a project in nursing research underway in 1975, if possible.

## The Development of the New Proposal

The Research Committee met on September 26, 1974, to begin writing a proposal for a three-year regional research project. Attending the meeting were Dr. Notter, whose consultative services with the research survey had proved so valuable to the committee's earlier work, and Dr. Thomas P. Phillips, nurse consultant, Nursing Research Branch, Division of Nursing, Department of Health, Education, and Welfare. The proposed project was to be based on the Council's recommendations from its 21st Meeting and on the findings of the regional survey.

The proposal, which is summarized below, is entitled "Nursing Research Development in the South" and was submitted to the Department of Health, Education, and Welfare in February 1975. The site visit on the proposal took place March 27, 1975. Final decision as to funding is now pending.

## Nursing Research Development in the South: A Proposal

The purpose of the project "Nursing Research Development in the South" is to strengthen the development of research in nursing and nursing education in fourteen states in the Southern region which are part of the Southern Regional Education Board's Council on Collegiate Education for Nursing. Objectives are (1) to identify research problems in nursing education, emphasizing those unique to nursing education rather than general education; (2) to identify other research problems which may include clinical practice and the delivery of health care; (3) to establish priorities among the research problems identified; (4) to promote development of research proposals; (5) to encourage faculty to involve students and other faculty and health professionals in their research; (6) to coordinate research efforts among the schools in the South; and (7) to disseminate information about research activities. Methods used will include conferences (for the total group of schools in the Council and for smaller special interest groups), consultation to schools and individual researchers, publication of a newsletter, as a means of communication, development of a roster of researchers in the South, and publication of a description of instruments and tests used in research. The project will be under the direction of a qualified nurse researcher. The long-range goal of the project is a viable ongoing research program in nursing in both nursing education and service agencies in the South.

### Project Action to Strengthen Continuing Education

The activities of the current regional project have laid the groundwork for strengthening continuing education programs for nurses in colleges and

universities in the South. In nursing, as in all health professions, there is acute and increasing need for practitioners continually to update and expand their knowledge and skills. Planning on a statewide and regional basis is essential if the needs of the region's nurses for continuing education are to be met in a systematic and economical way. Because continuing education promises to be one of the more pressing problems on today's scene in education, and because this area of nursing education promises to expand more rapidly than any other, the Regional Project for Nursing Education was intended from its inception to give continuing education high priority. The accomplishments of the project during the past three years have been substantial. Its work in this area has followed a logical plan: it first completed its goals and objectives; it surveyed the current scene to make sure that plans for the future would be based on a firm knowledge of what is currently going on in the region; it sought the opinions and good judgment of not only its own leaders in nursing education in the region but also of experts from other parts of the country; and then it set about the task of developing a proposal for specific regional action, a continuing education project all hoped would be underway in 1975.

## THE ORIGINS OF THE PROJECT'S CONCERN

In June 1969 the deans and directors of the collegiate schools of nursing in the South were asked to provide information concerning the nurses on their faculties having ongoing responsibility for and devoting more than 50 per cent of their time to continuing education. Twelve faculty members, three of whom were employed part-time, were identified and were invited to form the SREB Continuing Education Group, which first met in September 1969. Subsequently, this group, consisting of directors of collegiate programs in continuing education, has met twice a year to identify and discuss common problems and concerns, to plan for regional continuing education activities, and to develop long-range objectives.

By early September 1972, the Continuing Education Group had formulated its objectives to cover five major areas; its goals were:

1. To facilitate communication concerning current trends in continuing education among members of the Group, members of the Council, and other educators; the purpose of this improved network of communication would be:

   (a) to promote continuing education as an integral part of nursing education programs;

   (b) to increase the visibility of continuing education;

   (c) to encourage commitment to continuing education;

   (d) to encourage continuing education as an integral part of statewide and regional planning for health occupations and professions.

2. To promote interdisciplinary continuing education activities.

3. To promote the professional development of nurse faculty members who are responsible for or who teach in collegiate continuing education programs.
4. To promote faculty development for educators in all types of nursing education programs.
5. To recommend and help implement regional activities in priority areas of continuing education for nurses.

These goals and objectives gave direction to the activities of Continuing Education Committee; presented to the total Council at its fall 1973 meeting, they served to communicate to the Council what the Continuing Education directors saw as their major concerns.

At its fall 1972 meeting, the SREB Council on Collegiate Education for Nursing discussed the basic issues in continuing education for nurses. Reports from the small discussion groups included numerous suggestions for ways the regional project could increase its activity in continuing education. The consensus seemed to be:

- that continuing education should be coordinated on a statewide basis as well as on a regional basis;
- that the regional project should identify major resources within the region such as educational television;
- that guidelines for funding and coordinating continuing education should be developed;
- that information should be gathered about what is currently being done in the region in continuing education; this information would provide the basis for developing plans to strengthen continuing education in the region;
- that consortia and other cooperative arrangements need to be developed within the various states and in the region.

## PLANS FOR ACTION

The Council's concerns were discussed by the Continuing Education Group and by the Council's Steering Committee; the members of both groups agreed that plans for definite action should be made. First, the members of the Continuing Education Group were invited to attend the next Council meeting to be held in April 1973, to get at first hand a sense of the Council's concerns and thereby be in a better position to advise the regional project. The Continuing Education Group held two separate meetings during the April Council meeting and, with the Steering Committee, devised a method for collecting the information that the Council felt was needed.

Then at its August 1973 meeting, the Continuing Education Group completed plans to conduct its survey; their intention was to put together an overview of the status of organized continuing education in nursing in the region. Some of the categories of information sought were: major resources for con-

tinuing education in the fourteen SREB states; the agencies awarding continuing education units (CEUs) and maintaining permanent records for the individual nurses; the number of voluntary recognition programs for continuing education activities offered through the state nurses' associations; the numbers and kinds of programs concerned with emerging roles that are based in university schools of nursing; statewide planning for continuing education in nursing; and the preparation of faculty at the graduate level to direct and teach in continuing education programs. The survey was an informal one, but it supplied the Council at its fall meeting in 1973 with an overview of the state of continuing education in the region that would be essential to making any plans for further action. Readers who are interested in the survey results should consult the report to the Council by Frances P. Koonz.*

## THE FORMATION OF A CONTINUING EDUCATION COMMITTEE

The last decade has seen an unprecedented rate of growth in continuing education, not only in nursing, but in all fields. Service-oriented professions and occupations are hard-pressed to stay abreast of rapid technological and scientific developments; as a consequence, continuing education in nursing has experienced rapid growth. By mid-1973 the Continuing Education Group had expanded greatly, to over 25 members. It was decided that a group of this size would be too large to be an action group, and that it would be wise, as the group continued to expand, to appoint a smaller advisory committee to undertake the direction of regional activities in continuing education for nurses.

Since 1973, then, the work in continuing education of the project has been the concern of two closely related bodies. The larger Continuing Education Group continued to facilitate communication among nursing educators in the field of continuing education. The smaller Committee advised the project in the direction of specific action.

The first meeting of the newly appointed Continuing Education Committee was held in November 1973. Members of the committee were: Dorothy Blume, University of Texas, whom the Committee elected chairman; Sara K. Archer, Vanderbilt University; Susan M. Bruno, Medical College of Georgia; Frances P. Koonz, University of Maryland; Phyllis M. Loucks, University of Alabama; Marie L. Piekarski, University of Kentucky Community College System.

## THE 20th MEETING OF THE COUNCIL

Members of the Continuing Education Group had agreed that plans for a regional action project in continuing education would not be complete without input from the SREB Council on Collegiate Education for Nursing. Plans were therefore made to devote the program of the Council's 20th meeting, which was to take place in the fall of 1973, to the issues and trends in continuing education for nurses in the collegiate setting.

"Input," in this case, took two very distinct forms. First, of course, was the

* "Continuing Education in the South," *SREB Council on Collegiate Education for Nursing: Report of the 20th Meeting* (Atlanta: SREB, 1974), pp. 27-32.

formal program itself. Leaders in the field of continuing education were invited to present papers to the group. These included historical reviews on the subject: recent developments in continuing education generally, a review of ANA activity, and the report of the informal survey conducted by the Continuing Education Group. Several papers were concerned with the role of the community college in continuing education; problems in curriculum planning for continuing education were covered; and a number of papers debated the difficult and unresolved issues connected with the development of and use of the Continuing Education Unit (CEU). Reports of specific projects in other areas of the country were given, which helped to provide insight into administrative and technological problems in continuing education.

The papers were of such fine quality and thirst for material in the field was so great, that copies of the proceedings of the 20th meeting, which contained the texts of the speeches, were soon exhausted. However, most of the articles have also been printed in the *Journal of Continuing Education in Nursing*, 1974, volumes 1, 2, and 4.

Also appearing in the same journal were the texts of resolutions concerning continuing education in nursing that were presented to the Council at this meeting and subsequently adopted. These resolutions form the second form of "input" by the Council. They are crucial, of course, not only because they express the consensus of nursing educators in the South, but also because they have prompted direct action in strengthening continuing education in nursing in the region. Those activities will be described in sections following the texts of the resolutions, given below.

## THE COUNCIL'S RESOLUTIONS ON CONTINUING EDUCATION

### Resolution 1. Responsibilities of Associate, Baccalaureate, and Higher Degree Programs

Whereas, the nursing profession has long maintained that the major responsibility for nursing education belongs with institutions of higher education; and

Whereas, the National Commission to Study Nursing and Nursing Education reported almost universal agreement on the growing necessity for increased and improved continuing education programs in nursing; and

Whereas, the National Commission to Study Nursing and Nursing Education recommended that each state master planning committee for nursing education identify one or more institutions to be responsible for regional coverage of continuing education programs for nurses within that area; therefore, be it

Resolved, that deans and directors of nursing education programs in the South actively support or take the initiative in the development and ongoing facilitation of statewide master plans which include planning for continuing education; and further be it

Resolved, that in order to meet the continuing education needs in all geographic areas, urban and rural, nursing education programs in colleges and universities in the South be encouraged to participate in the development of

continuing education programs for nursing when the following conditions exist:

1) the institution's program is planned in coordination with other agencies and institutions in the area,

2) adequate resources, facilities, and qualified faculty are available, and

3) a clearly identified need exists.

## Resolution 2. Developing Continuing Education Programs

Whereas, discussions at the 18th and 19th meetings of the SREB Council reflect a concern for further development of continuing education programs in collegiate nursing education programs in the South; and

Whereas, findings of the SREB survey about continuing education, spring, 1973, indicate that directors of collegiate nursing education programs in the South believe that continuing education as well as basic and graduate education programs are essential in meeting the accelerating and changing health needs of the public in the South; and

Whereas, eleven of the fourteen SREB states are part of the Southern Association of Colleges and Schools and are therefore under administrative mandate to apply "Standard Nine, Special Activities," which is to strengthen continuing education; and

Whereas, on a national level, through the Council on Continuing Education of the American Nurses' Association, continuing education is beginning to receive the attention that has long been given to basic and graduate programs; and

Whereas, the National Commission to Study Nursing and Nursing Education urges the development and funding of continuing education for nurses; therefore, be it

Resolved, that collegiate nursing education programs in the South continue to support the development of continuing education; and be it further

Resolved, that support for continuing education programs be exemplified by providing

1) a specific and adequate budget for the program,

2) sufficient numbers of prepared faculty,

3) adequate administrative organization including supportive personnel, and

4) appropriate resources and facilities; and be it further

Resolved, that in schools where continuing education is conducted outside the aegis of the nursing program, continuing education offerings for nurses should be planned and implemented in conjunction with the nursing department.

## Resolution 3. Regional Project for Continuing Education

Whereas, an increasing number of schools in the South are involved with programs of continuing education or are considering such program expansion; and

Whereas, there are faculty involved in the direction of these programs who are new to such responsibilities; therefore, be it

Resolved, that if at all possible the SREB Regional Planning for Nursing Project sponsor a continuing education project for the further development of directors or coordinators of continuing education in collegiate nursing schools in the South.

## Resolution 4. Regional Planning

Whereas, regional continuing education programs are needed for nurses who are limited in number in their particular specialty (for example, directors of state public health nursing; clinical specialists; nurse researchers) and for whom it is not economically feasible to develop continuing education programs within each state; and

Whereas, regional planning offers opportunity to utilize existing and emerging communication network technologies to provide educational programs for large numbers of nurses covering a wide area irrespective of state borders; and

Whereas, regional planning is needed in order to share resources and avoid costly duplication in the development of instructional materials such as films, slides, audio and video tapes, and independent study packets; therefore, be it

Resolved, that through the SREB Regional Planning for Nursing Project, the SREB Council on Collegiate Education for Nursing, and the SREB Continuing Education Group, every effort be made to undertake the types of activities which are practical and economically feasible on a regional basis, such as providing for selected continuing education programs in special areas and the coordinated development and sharing of technological instructional material.

## Resolution 5. Use of CEU

Whereas, it is recognized that there is a need for a systematic permanent record for non-credit continuing education activities; and

Whereas, the American Nurses' Association recommends use of the Continuing Education Unit (CEU) as described by the National Task Force on the CEU to record continuing education for nurses; and

Whereas, the Southern Association of Colleges and Schools requires use of the CEU for recording and reporting non-credit continuing education activities; therefore, be it

Resolved, that collegiate nursing programs in the South which provide non-credit continuing education use the CEU as described by the American

Nurses' Association, the National Task Force on the CEU, and the Southern Association of Colleges and Schools.

### Resolution 6. Recognition of Previous Learning

Whereas, the content of some continuing education courses may be similar to components of courses in either associate, baccalaureate, or master's degree programs; and

Whereas, nurses gain knowledge and skills in a variety of ways including non-credit or credit continuing education courses and subsequently may wish to pursue an academic degree; therefore, be it

Resolved, that schools of nursing in the South seek a variety of ways to evaluate individuals' previous learning for partial or full credit for certain required or elective courses in associate, baccalaureate, or master's degree programs.

## THE REGIONAL WORKSHOP

One of the primary concerns of the Council, as can be seen in these resolutions, has been that expansion in continuing education might occur so rapidly that thorough preparation of faculty might fall behind. Educators generally agree that education for the adult learner takes a very different form than that for the pre-service student; very few veteran educators, whether in nursing or in other fields, are prepared to direct and to teach in continuing education programs. Faculty development is therefore very high on the list of priorities.

It was with this in mind that the Regional Project in Nursing Education co-sponsored with the College of Nursing of the University of Kentucky a regional workshop for the directors of continuing education programs at Southern colleges and universities. The workshop was held May 29-31, 1974, and was attended by 52 program directors from the Southern region. Two specialists in continuing education in nursing, Marie Piekarski and Irma Bolte of the University of Kentucky, directed the conference, which was entitled "Conducting Continuing Education Programs for Nurses in Colleges and Universities." The enthusiastic evaluations made by participants at this first regional workshop on continuing education pointed to the need for more such workshops to be conducted in the region.

## DEVELOPMENT OF A CONTINUING EDUCATION PROJECT

At its first meeting after the new Regional Project in Nursing Education was begun, in the fall of 1972, the Council had indicated its interest in helping the project to formulate a proposal for a regional project in continuing education in nursing. The Continuing Education Group and the Continuing Education Committee both had likewise expressed their support of such action. Now, with Resolution 3 formally voted upon and passed by the Council, the project was operating under a specific mandate, to try to find a way to "sponsor a continuing education project for the further development of directors and coordinators of continuing education in collegiate nursing schools in the South."

Project Director Audrey Spector, working with the advice of both the project Steering Committee and people in the Continuing Education Group and Committee, began work on the first draft for the proposal in the spring of 1974. All were agreed that approaching the problem on a regional scale would be the best way to foster the most efficient and economic development of collegiate-based continuing education for the region's nurses.

The current status of the proposal is that a draft has been reviewed by the Council's Steering Committee and Continuing Education Committee, and it has been discussed with a representative of a foundation. It is expected that the proposal will be finalized and submitted to a prospective funding source in late 1975 or early 1976.

## Other Work of the 1972-75 Project

By its very nature, regional planning for nursing education tends to have many facets; the array of seemingly small tasks and functions can seem confusing and even disjointed unless they are viewed as a whole. Such an overview impresses the observer with the interlocking complexity of planning on a regional scale. In fact, the subtle interplay of input and feedback between the individuals, the institutions, and the agencies that are involved in the different activities of the Regional Project for Nursing Education could probably be designated one of its most important contributions to nursing education in the region. In this section is reviewed briefly some of these tasks that the project has performed for nursing education in the South during the past three years.

### COLLECTION AND DISSEMINATION OF DATA

The gathering of information has been the first and most basic step taken in any of the project's enterprises. Knowing what to do next and how to do it is not possible until knowledge about what *is* can be pulled together. In the project's work on behalf of research in nursing and of continuing education for nurses, surveys that gave an accurate picture of the status quo were the foundation of follow-up efforts to institute direct action. The project proposals emanating from these efforts are based on sound research on the current state of affairs.

In addition, the project has provided nursing educators in the region with an ongoing flow of information that is not otherwise available. In each of the proceedings books* for the fall meetings of the Council the project has included a statistical section that provides the latest information regarding: the numbers of nursing education programs, admissions, enrollments, and graduations; nursing faculty, their numbers, unfilled positions, and estimates of new positions needed in the remainder of the academic year and the upcoming year. Helen A. Pemberton, former SREB staff member, was employed as a consultant in the initial prepartion of this material.

*See list of project publications, p. 42 below.

## COOPERATION WITH OTHER SREB NURSING PROJECTS

Coordination of the work of this project with other projects of regional scope in nursing and nursing education is an important part of this project's service to the region. Two SREB nursing projects have been operating during the years that this project has been underway, and both have received the support of the project staff and the Council members.

SREB's Project IODINE, known officially under the title Expanding Opportunities in Nursing Education for Persons of Diverse Backgrounds, is a federally funded project to increase opportunities for the disadvantaged in nursing education. Its goals are to encourage the enrollment, retention, and graduation of those students in three college-based nursing programs in the South.

The director of Project IODINE, Eula Aiken, reported her project's progress to the Council at several of its meetings, and IODINE was the main focus of the program of the 24th Council meeting, held in the spring 1975. In addition, there has been considerable informal exchange of information between the two projects. For example, when directors of programs ask the Regional Project in Nursing Education for assistance in strengthening their offerings for disadvantaged students, Project IODINE is called upon and gives advice.

At group discussions at the 24th Council meeting, strong interest in the formulation of a new project in this area was expressed. The proposal is now being written for a project which seeks to carry forward the work of project IODINE.

The Regional Project for Nursing Education has also cooperated with the SREB Nursing Curriculum Project, the purpose of which is to implement one of the recommendations of the Commission for the Study of Nursing and Nursing Education. The project's goal is "to describe and differentiate among the types of nursing personnel needed for the future, based on the needs of the people of the region for health services" and "to propose ways in which these nurses can best be educated."

As with Project IODINE, cooperation with this project has had both an informal and a formal aspect. The Nursing Curriculum Project director, Patricia Haase, has reported regularly to the Council at its meetings on the progress of the project, and members of the project staff and the project's seminar group reported its findings and recommendations to the Council at its 22nd meeting in the fall of 1974. These papers and the discussions emanating from them formed the main content of the conference program.

The full text of the reports of both these projects to the Council and summaries of the discussions by Council members can be found in the Council proceedings books.*

One other activity, initiated during the previous five years of Nursing Council activity and receiving the cooperation and support of the current project, was the project entitled Psychiatric/Mental Health Training for Associate Degree Faculty. It was a three-year project that was cosponsored by SREB and conducted at the University of North Carolina at Chapel Hill. The project was completed in 1973.

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*See list of project publications, p. 42 below.

## SUPPORT OF STATEWIDE PLANNING FOR NURSING EDUCATION

At the first two Council meetings after the institution of the current project provision was made for the nurse educators from each state to meet in state groups to discuss statewide planning for expanded roles in nursing and for continuing education for nurses. These meetings of state groups were discontinued at the request of the representatives themselves, who indicated that mechanisms for statewide planning in their own states were now well enough developed to make these meetings under project auspices unnecessary.

In addition, the project director has served as a consultant on continuing education to three states in the region and in this capacity has promoted statewide planning.

## PROMOTION OF UNDERSTANDING OF THE EXPANDED ROLE IN NURSING

The 19th meeting of the Council held in the spring of 1973 devoted its program to nursing education for expanded roles in nursing. Speakers at the meeting explored the role of associate degree, baccalaureate, graduate, and continuing education programs in preparing nurses for expanded practice and the means for preparing faculty members to teach the new roles.

In preparation for this meeting, information was collected about the educational programs to prepare faculty to teach the expanded role and the availability of such programs to faculty from other schools in the region. The proceedings book for this meeting published the texts of all papers that were delivered, as well as summaries of group discussions and the background information collected prior to the meeting.*

## CONSULTATIVE SERVICES

The director of the Regional Project in Nursing Education receives frequent requests for information and assistance from institutions, agencies, and individuals concerned with nursing education from all the 14 SREB states. Because the SREB and this project enjoy the distinction of being among the very few institutions having regional compass in nursing education, the project finds itself serving often as a clearinghouse of information.

The most frequent requests are for identification of resource people who are unknown to the person requesting the information but who are located near his institution or agency. The fact that nearby resources are often unknown only points up the importance of the information network that regional planning can provide.

Another common request is for advice on how—or whether—to start a new nursing program. The issues involved in this type of request are difficult but crucial ones; they too point up one area of fundamental concern in regional planning—the optimal use of resources and the careful avoidance of dupli-

*See list of project publications, p. 42 below.

cation and waste. Planning on a regional scale is a necessity if resources are not to be misused.

Information of the sort that the project supplies is not always very easy to obtain, and staff members consider this kind of service, however small and piecemeal it may seem to be at times, to be one important facet of a crucial function of any regional planning body: the free flow of and ready access to current, accurate information.

## EFFORTS TO STRENGTHEN GRADUATE EDUCATION

The major activity of the project in this area, aside from the formal actions taken on behalf of nursing research, which is reviewed above in detail, has been to encourage consortium arrangements. Directors of graduate programs in four states met with SREB staff during a Council meeting to explore ways to share resources and develop cooperative programs. Although lack of time prevented further work on developing consortia during this project, the groundwork is laid for future activities in this area.

# Evaluation of the Project—1972-1975

This three-year project supported by the Division of Nursing, DHEW, provided a period in which the Southern region was able to do that which was badly needed and could have been accomplished only with support from outside sources: 1) the region took a close look at the need for continued regional planning for nursing education, decided that there was indeed a need to continue, and found a way to do it. 2) At the same time, a variety of activities were conducted to strengthen nursing education in the South.

This evaluation of the project discusses the accomplishments of the three years, current concerns and activities, and takes a look at the future for regional planning for nursing in the South.

## Accomplishments

As already described, the project's major achievement was in working out arrangements for regional planning for nursing education in the South to continue after the present project ends. This was by no means an easy task and required considerable time to accomplish. For the better part of the first year, the project director had to go through a getting-acquainted process, and came to grips with the complexities of planning which involved two groups—the Council and SREB. The Council expressed early and adamantly its wish to continue as a body, and to continue in association with SREB. The problem of financing was the main obstacle, and months of exploration were necessary before Council participants decided they could and would pay an annual fee to support its basic operations. From the beginning, SREB consistently expressed its wish to continue its long-standing activity in nursing education, but it could not finance the Council.

The solution, which emerged in the second year of the project, was a joint agreement between SREB and the Council, with SREB agreeing to provide administrative services and other support, and the Council providing the bulk of the hard money. The change came about through the combined efforts of members of both groups. In addition, the commitment of the presidents or chancellors of the institutions in the fourteen Southern states which have nursing education programs was also essential to the development of the new arrangement.

The third and final year of the project provided a transition period in which the new arrangements were put into operation. In the new arrangement, Council members and the institutions they represent have had to make significant commitments to regional planning. Council members, in addition to paying their own expenses for attending meetings of the Council, which they have always done, now pay an annual fee to belong to the Council. Since it was believed that the Council needed the support of the president or chancellor of the institution that is represented, the new arrangement has built into it the requirement that the administrative officer of the participating college or institution names the nurse who is the administrative head of the

nursing program to be a member of the Council. The nurse administrative head then names others from the nursing program to be Council members, including persons such as directors of graduate, baccalaureate, and continuing education programs in nursing within that institution.

The new arrangement means considerable change within the Southern Regional Education Board. Although long involved in nursing education, SREB had previously operated with a variety of nursing projects which were all in the Special Programs Department and each of which was administered as a separate project operating independently of the others. The Council, while it served as the major planning group for the regional projects in nursing, was always supported through outside funding, did not have elected officers, and had always met as a part of one nursing education project at SREB.

In the new arrangement which takes effect July 1975, all nursing projects at SREB will be coordinated by the nursing programs director, who will have a dual responsibility, being at the same time executive director of the SREB Council on Collegiate Education for Nursing. This arrangement is expected to provide a more clearly identifiable nursing component at SREB. It is expected also to promote the coordination of SREB nursing projects.

As the project ends in mid-1975, the Council consists of 192 participating institutions, which includes 192 nurse administrative heads of programs, plus 70 directors of specific programs within the participating institutions, such as directors of graduate, baccalaureate, associate degree, and continuing education programs. There is every reason to believe the Council will continue to be a viable, influential body under the new arrangement.

Other accomplishments of the project, described earlier, were limited only by the amount of time required to achieve the major goal. Those activities laid the groundwork for the development of future projects.

## Current Concerns and Activities

As the project ends and the Council and SREB enter into a new association beginning officially July 1, 1975, there are two categories of concern that require the careful attention of the Council, SREB, and staff. One concerns the organizational structure and relationship between the Council and SREB; the second, the activities to be undertaken to develop programs in the region.

### ORGANIZATIONAL STRUCTURE AND RELATIONSHIP

The Council, beginning in 1975, is operating for the first time in its history as a dues-paying membership organization. It has elected officers for the first time, and is having to change from a loosely organized group to one with sufficient structure to take action. The Statement of Institutional Participation, reproduced earlier in this report, is an interim document designed to get the Council underway. It does not spell out rules and operating procedure. Therefore, bylaws or some more definitive statement is needed to develop a procedure for voting and for conducting business meetings. The Council plans to be an action-oriented body, which makes it essential that an equitable means of voting on proposed actions be established. It can reasonably be

expected that dues-paying members will feel more acutely the need to have an active voice in Council decisions. The development of bylaws or at least rules of operation is imperative, and work is already underway on this.

Another concern is about membership in the Council. At present, only nurses are eligible for membership. This means that persons who are not nurses but who are employed as directors of continuing education for nurses, for example, are not eligible for membership. The solution thus far is to invite such persons to attend Council meetings by paying a registration fee. Only time will tell if this is a satisfactory means of including non-nurses in regional planning. Considerations thus far are: can the Council get too big to be effective as an action body? If non-nurses are included as members, would it change the focus of the Council in a way contrary to the Council's goals? What about others such as nurse researchers, persons responsible for curriculum development in schools of nursing, or for statewide planning for nursing education? What is the best way to work with them—as members of the Council or in some liaison arrangement? All these questions are currently being studied, but may not be answered until the Council has experience with its present membership structure. The present approach to these questions about membership is to maintain the Council as an organization of nurse educators, and involve others in specific projects.

The matter of attendance at Council meetings is another concern. In the past, there was no substitution; only the official representative of the school was eligible to attend Council meetings. This arrangement provided continuity. It also meant that Council members had no choice; they either attended or the school was not represented.

Now, the new plan is for alternates to be eligible to attend. Will the result be that deans send faculty and do not attend meetings? If so, this could seriously hamper the Council's ability to make decisions about priorities and activities and weaken its effectiveness as a regional planning body. The whole idea of continuity in the Council will be effected. The alternate may not have the authority to express support for proposed ideas and the work of the Council could be seriously slowed down.

The Council wants to be an action-taking body. To take action requires that persons with authority to speak for the institution be involved in exploring problems, suggesting solutions, and contributing to the decision to pursue a certain course. The Council's ability to advise and implement regional activities may be seriously hampered if alternates and not the deans and directors attend meetings where subjects are discussed and initial decisions are made.

Should there be a limit on how many times an alternate can attend? This might make sense, and yet, a school paying membership fees may feel entitled to vote, even if the official representative cannot attend the meetings.

This question about alternates is part of a larger question about voting. As presently arranged, voting may be done at Council meetings, or it can also be done by mail. So far, no specific plan has been developed. What will be the criteria for deciding if a vote at the Council meeting is binding on the Council? What constitutes a quorum, and will votes be by written ballot or show of hands? Should all voting be by mail with only official members voting?

These questions are currently being explored by the Council, its Executive Committee, and staff. The goal is to develop plans that are sufficiently flexible so the Council can act, but so that changes can be made and the Council can avoid organizational rigor mortis.

As organizations become more structured and formalized, they have a tendency to become less responsive to change and less able to act quickly. Since the new arrangement for regional planning in the South involves two organizations, the Council and SREB, both organizations are trying to maintain a suitably flexible arrangement.

## CURRENT PROGRAM ACTIVITIES

As the Regional Planning for Nursing Project phases out and the new arrangement becomes operational, the Council, SREB, and the nursing programs director at SREB are engaged in a variety of activities. They all aim to strengthen nursing education in the South. Some activities are: planning for regional participation in a national project entitled "Analysis and Planning for Improved Distribution of Nursing Personnel and Services"; planning regional projects to stimulate research in nursing, for faculty development, for continuing education, and for preparation of nurses for expanded roles. In addition, annual gathering of statistics about nursing education programs in the region is underway.

### A Look at the Future

The outlook for regional planning for nursing education in the South is excellent. The individuals involved in both the Council and SREB have a long-standing commitment to cooperative undertakings and a proud history of accomplishment. Both organizations have now committed themselves to a carefully thought-out arrangement, which evolved over time and is based on mutual understanding of the obligations each carries.

The challenges are there. The viability of the Council depends on continued support emotionally and financially from Council members and SREB. This means each school has to receive some benefit to justify its participation. And that means activities have to be carried on which have been useful in the past (data gathering, reports, statistics; projects generated and conducted). All these activities require money and staff time. The amount of money now available to support basic operation is nowhere near that which has been used in previous years. Can essential activities be carried on at full speed, with less money? Will the interests of SREB and the Council continue to coincide?

In a mutual arrangement such as between SREB and the Council, policies and activities have to be acceptable to both. Despite the good will and trust existing in both parties, differences are bound to occur. The success with which these are resolved will determine how effective the arrangement is in the future.

Given the years of association between the Council and SREB, there is every reason to believe the new arrangement will work, and that regional planning for nursing in the South is indeed completing an historic transition period and entering a new era that will benefit the South, its nurses, and the public.

# Appendices

## Institutions That Participated in the Council 1972-1975

Participation in the Council takes a variety of forms, ranging from full membership with voting rights to status as an observer or visitor on a temporary basis. In the rosters published in each of the Council's proceedings books care has been taken to distinguish the precise form of a person's participation at each of the meetings. However, for this report such great detail seemed inappropriate, even impossible, especially in light of the fact that an individual's status as Council member has often changed over the three-year period of the project's activity.

With this list we wish simply to indicate our deep appreciation for the support of the project that each of these institutions has expressed by sending representatives to Council meetings. The contributions of all participants have been valuable, regardless of their membership status. This listing of institutions is the best way to acknowledge our indebtedness.

ALABAMA

Gadsden State Junior College*
George C. Wallace State Community College
George C. Wallace State Technical Community College
J. C. Calhoun State Community College*
Jacksonville State University
Jefferson Davis State Jr. College
Jefferson State Junior College*
Livingston University*
Mobile College*
Northwest Alabama State Jr. College
Oakwood College
Samford University*
Theodore Alfred Lawson State Community College
Troy State University*
Tuskegee Institute*
University of Alabama in Birmingham*
University of Alabama in Huntsville*
University of North Alabama
University of South Alabama*

ARKANSAS

Arkansas State University
Phillips County Community College*
Southern State College*
University of Arkansas at Fayetteville*
University of Arkansas at Little Rock*
University of Arkansas at Monticello*
University of Arkansas Medical Center*
University of Central Arkansas*
Westark Community College

FLORIDA

Barry College*
Brevard Community College*

*Those institutions which at the time of publication have joined the newly structured Council.

FLORIDA (continued)

Broward Community College*
Central Florida Community College
Daytona Beach Community College*
Edison Community College
Florida A & M University*
Florida Junior College
Florida Keys Community College
Florida International University*
Florida State University*
Gulf Coast Junior College
Hillsborough Community College in Plant City*
Hillsborough Community College in Tampa*
Indian River Community College*
Lake City Community College*
Manatee Junior College*
Miami-Dade Community College*
Palm Beach Junior College*
Pensacola Junior College*
Polk Community College
Santa Fe Community College*
St. Petersburg Junior College in Clearwater*
St. Petersburg Junior College in St. Petersburg*
Tallahassee Community College
University of Florida*
University of Miami*
University of South Florida*
Valencia Community College*

GEORGIA

Abraham Baldwin Agricultural College*
Albany Junior College*
Albany State College*
Armstrong State College*
Augusta College
Brunswick Junior College
Clayton Junior College
Columbus College
Dalton Junior College*
DeKalb Community College*
Emory University*
Floyd Junior College*
Georgia College*
Georgia Southwestern College*
Georgia State University*
Gordon Junior College
Kennesaw Junior College*
LaGrange College
Macon Junior College
Medical College of Georgia*
Middle Georgia College
North Georgia College*
South Georgia College*
Valdosta State College*
West Georgia College*

KENTUCKY

Berea College
Cumberland College*
Eastern Kentucky University*
Kentucky State University*
Midway Junior College
Morehead State University*
Murray State University*
Northern Kentucky State College*
Spalding College*
University of Kentucky*
University of Kentucky Community College System*
Univerity of Kentucky Elizabethtown Community College*
University of Kentucky Henderson Community College
University of Kentucky Hopkinsville Community College
University of Kentucky Jefferson Community College
University of Kentucky Lexington Technical Institute*
University of Kentucky Maysville Community College
University of Kentucky Paducah Community College
University of Kentucky Prestonburg Community College
University of Kentucky Somerset Community College
Western Kentucky University*

LOUISIANA

Dillard University*
Louisiana State University in Alexandria*
Louisiana State University in Eunice*
Louisiana State University in New Orleans*
Louisiana Tech University
McNeese State University*
Nicholls State University*
Northeast Louisiana University*
Northwestern State University*
Southeastern Louisiana University*
Tulane University*
University of Southwestern Louisiana*

MARYLAND

Allegany Community College*
Anne Arundel Community College
Catonsville Community College*
Columbia Union College*
Community College of Baltimore
Coppin State College*
Essex Community College
Frederick Community College*
Hagerstown Junior College*
Harford Junior College
Howard Community College
Johns Hopkins University School of Health Services*
Johns Hopkins University School of Hygiene and Public Health*
Montgomery Community College*
Morgan State College
Prince George's Community College*
St. Joseph College
Towson State College*
University of Maryland*

MISSISSIPPI

Hinds Junior College*
Itawamba Junior College*
Jones County Junior College*
Meridian Junior College*
Mississippi College*
Mississippi Delta Junior College*
Mississippi Gulf Coast Junior College at Gautier
Mississippi Gulf Coast Junior College at Gulfport*
Mississippi University for Women*
Mississippi Valley State University*
Northeast Mississippi Junior College*
Northwest Mississippi Junior College
Pearl River Junior College*
University of Mississippi Medical Center*
University of Southern Mississippi at Hattiesburg*
University of Southern Mississippi at Natchez*
William Carey College*

NORTH CAROLINA

Asheville-Buncombe Technical Institute
Atlantic Christian College*
Beaufort County Technical Institute
Central Piedmont Community College
Chowan College
Coastal Carolina Community College
College of the Albemarle
Craven Community College
Davidson County Community College
Duke University*
East Carolina University*
Fayetteville Technical Institute
Forsyth Technical Institute*
Gardner-Webb College*
Gaston College
Guilford Technical Institute
James Sprunt Institute*
Lenoir Rhyne College*
North Carolina A & T State University*

NORTH CAROLINA (continued)

North Carolina Central University*
Rockingham Community College*
Rowan Technical Institute
Sampson Technical Institute
Sandhills Community College
Southeastern Community College
Surry Community College
University of North Carolina at Chapel Hill*
University of North Carolina at Charlotte*
University of North Carolina at Greensboro*
University of North Carolina at Wilmington*
University of North Carolina School of Public Health*
Wayne Community College
Western Carolina University*
Western Piedmont Community College*
Winston-Salem State University*

SOUTH CAROLINA

Baptist College at Charleston*
Clemson University*
Florence-Darlington Technical College*
Greenville Technical College*
Lander College*
Medical University of South Carolina*
University of South Carolina at Aiken*
University of South Carolina at Columbia*
University of South Carolina at Spartanburg
University of South Carolina Coastal Carolina Regional Campus
University of South Carolina Francis Marion College

TENNESSEE

Austin Peay State Univerity*
Belmont College*
Cleveland State Community College*
Columbia State Community College*
East Tennessee State University at Bristol*
East Tennessee State University at Johnson City*
Meharry Medical College*
Memphis State University*
Middle Tennessee State University
Southern Missionary College*
Tennessee State University*
Union University*
University of Tennessee at Chattanooga*
University of Tennessee at Knoxville*
University of Tennessee at Martin*
University of Tennessee at Memphis*
University of Tennessee at Nashville*
Vanderbilt University*
Walters State Community College*

TEXAS

Alvin Junior College
Amarillo College
Angelo State University*
Baylor University*
College of the Mainland
Cooke County Junior College
Dallas Baptist College*
Del Mar College
Dominican College
El Centro College*
El Paso Community College
Galveston College
Grayson County College*
Houston Baptist University*
Incarnate Word College*
Kilgore College
Lamar University*
Laredo Junior College*
Mary Hardin-Baylor College*
McLennan Community College*

TEXAS (continued)

Midwestern University
Odessa College*
Pan American University
Paris Junior College
Prairie View A & M University*
San Antonio College
San Jacinto College
Southwestern Union College*
Tarrant County Junior College*
Texarkana Community College
Texas A & I University at Corpus Christi
Texas Christian University*
Texas Woman's University
Tyler State College
University of St. Thomas*
University of Texas System*
University of Texas, School of Nursing at Austin*
University of Texas, School of Nursing at El Paso*
University of Texas, School of Nursing at Fort Worth*
Univerity of Texas, School of Nursing at Galveston*
University of Texas, School of Nursing at Houston*
University of Texas, School of Nursing at San Antonio*
West Texas State University*

VIRGINIA

Dabney S. Lancaster Community College
Eastern Mennonite College*
George Mason University*
Germanna Community College
Hampton Institute*
J. Sargeant Reynolds Community College*
John Tyler Community College
Marymount College of Virginia*
Norfolk State College*
Northern Virginia Community College*
Old Dominion University*
Patrick Henry Community College
Piedmont Virginia Community College
Radford College*
Shenandoah College*
Thomas Nelson Community College*
Tidewater Community College*
University of Virginia*
Virginia Commonwealth University Medical College of Virginia*
Virginia Highlands Community College
Virginia Western Community College
Wytheville Community College

WEST VIRGINIA

Alderson-Broaddus College*
Bluefield State College
Fairmont State College
Marshall University*
Morris Harvey College*
Parkersburg Community College*
Salem College*
Southern West Virginia Community College
West Liberty State College
West Virginia Institute of Technology
West Virginia University
West Virginia Wesleyan College

## Committees 1972-1975

Every participant in the Council contributes to Council activities in a variety of ways—from answering questionnaires that collect data for the region, to voicing views on matters of concern to the region, presiding and speaking at Council sessions, and providing informal sources of advice and information to staff and Committees. The following rosters list only those who have served on specific committees.

### INTERIM STEERING COMMITTEE
June 1972–November 1972

Ms. Doris Bates
Clayton Junior College
Georgia

Dr. Lucy Conant
University of North Carolina
at Chapel Hill

Ms. Georgeen H. DeChow
Manatee Junior College
Florida

Dr. Virginia Jarratt
Texas Christian University

Dr. Gwendoline MacDonald
University of Miami

Ms. Ruth Neil Murry
University of Tennessee
at Memphis

### STEERING COMMITTEE
1972–1975

Dr. Marie L. O'Koren, Chairman
University of Alabama
in Birmingham

Dr. Sara K. Archer
Vanderbilt University
Tennessee

Ms. Margaret Armstrong
Meridian Junior College
Mississippi

Dr. Elois Field
University of Arkansas
Medical Center

Ms. Gertrude Hodges
Community College of Baltimore

Dr. Jewellean Mangaroo
Prairie View A & M University
Texas

Ms. Almeda B. Martin
St. Petersburg Junior College
Florida

Dr. Dorothy M. Talbot
University of North Carolina
at Chapel Hill

## EXECUTIVE COMMITTEE
Established 1975

Dr. Marie L. O'Koren, Chairman*
University of Alabama
in Birmingham

Ms. Georgeen H. DeChow*
Manatee Junior College
Florida

Ms. Shirley Lee**
Tidewater Community College
Frederick Campus
Virginia

Dr. Eloise R. Lewis*
University of North Carolina
at Greensboro

Dr. Gwendoline MacDonald*
University of South Florida

Dr. Glendola Nash**
Houston Baptist University

Mr. Robert W. Vogler*
Cleveland State Community College
Tennessee

*Elected by the Council
**Appointed by SREB

## AD HOC BYLAWS COMMITTEE
Established 1974

Ms. Mary Hardy, Chairman
El Centro College
Texas

Dr. Blanche Urey
University of Florida
Florida

Mr. Robert Vogler
Cleveland State Community College
Tennessee

Dr. Dorothy White
Medical College of Georgia
Georgia

## CONTINUING EDUCATION COMMITTEE
## 1973–1975

Ms. Dorothy Blume, Chairman
University of Texas System

Dr. Sara K. Archer
Vanderbilt University
Tennessee

Ms. Susan M. Bruno
Medical College of Georgia

Ms. Frances P. Koonz
University of Maryland

Ms. Phyllis M. Loucks
University of Alabama
in Birmingham

Ms. Marie L. Piekarski
University of Kentucky
Community College System

## CONTINUING EDUCATION GROUP
As of November 1972

Ms. Flora Bain
University of Southern Mississippi

Ms. Dorothy Blume
University of Texas System

Ms. Irma Bolte
University of Kentucky

Ms. Dorothy Danielson
University of North Carolina
at Chapel Hill

Ms. Jane Dawson
Texas Woman's University

Ms. Alda Ditchfield
Medical College of Georgia

Ms. Betty Gwaltney
Virginia Commonwealth University

Ms. Dorothy Hocker
University of Tennessee
at Memphis

Ms. Frances P. Koonz
University of Maryland

Ms. Linda Lambert
University of Arkansas
at Little Rock

Ms. Phyllis M. Loucks
University of Alabama
in Birmingham

Ms. JoAnn H. Patray
University of Florida

Ms. Gearlean Slack
West Virginia University

Dr. Elizabeth Stobo
University of South Carolina
at Columbia

## LONG-RANGE PLANNING COMMITTEE
1973–1975

Ms. Almeda Martin, Chairman
St. Petersburg Junior College
Florida

Dr. Lucy Conant
University of North Carolina
at Chapel Hill

Ms. Mary Hardy
El Centro College
Texas

Dr. Virginia Jarratt
Texas Christian University

Dr. Geraldine Labecki
Clemson University
South Carolina

Ms. Charlotte S. Sachs
Kennesaw Junior College
Georgia

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## RESEARCH COMMITTEE
1973–1975

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at Chapel Hill

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## Project Staff Members

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## Project Publications

*Nursing Research in the South, A Survey,* by Lucille E. Notter and Audrey F. Spector, 1974. Available from Southern Regional Education Board, 130 Sixth Street, N.W., Atlanta, Georgia 30313.

SREB Council on Collegiate Education for Nursing,
Reports of Meetings 1972–1975*

*Report of the 18th Meeting,* fall 1972. (This report of the first meeting of the Council under the Regional Planning for Nursing Project described developments in nursing education nationally and in the South, and identified priorities for the Council to address in the coming years.)

*Report of the 19th Meeting,* spring 1973. (This report explored the responsibility of associate degree, baccalaureate, graduate, and continuing education in preparing nurses for a new enlarged role in health care in the South.)

*Report of the 20th Meeting,* fall 1973. (This report provided information about the current status of continuing education for nurses nationally and in the South, explored issues and practices in continuing education, and made recommendations to strengthen continuing education for nurses in the South.)

*Report of the 21st Meeting,* spring 1974. (This report focused on research in nursing in the South and the future of the Council.)

*Report of the 22nd Meeting,* fall 1974. (This report dealt with the future of the Council and curriculum reform in nursing education.)

*Report of the 23rd Meeting,* spring 1975. (In this report of the last meeting of the Council under the Regional Planning for Nursing Project, SREB and the Council delineated their respective roles and responsibilities and planned for continued regional action. The major portion of the report addressed the topic "Facilitating Academic Success for Persons of Diverse Backgrounds in Nursing," and explored matters such as recruitment and retention of students and faculty development activities.)

*All of these publications are now out of print; at the time of publication they were mailed to the dean or director of each school of nursing listed under Roster of Participating Institutions.